

**APPLICATION DATA SHEET****Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Sequence submission?::	No
Title::	SECURE PAYMENT SYSTEM
Attorney Docket Number::	48335-227033
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure?::	5
Total Drawing Sheets::	5
Small Entity?::	No
Petition Included?::	No
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority type::	Inventor
Primary Citizenship Country::	Australia
Status::	Full Capacity
Given Name::	Hector
Middle Name::	Daniel
Family Name::	ELBAUM
City of Residence::	Templestowe
State or Province of Residence::	Victoria
Country of Residence::	Australia
Street of Mailing Address::	5 Beavis Court
City of Mailing Address::	Templestowe
Country of Mailing Address::	Australia
Postal or Zip Code of Mailing Address::	3106

**Applicant Information**

Applicant Authority type:: Inventor  
Primary Citizenship Country:: Australia  
Status:: Full Capacity  
Given Name:: Andrew  
Family Name:: Jamieson  
City of Residence:: Brunswick  
State or Province of Residence:: Victoria  
Country of Residence:: Australia  
Street of Mailing Address:: 12 Harrison Street  
City of Mailing Address:: Brunswick  
Country of Mailing Address:: Australia  
Postal or Zip Code of Mailing Address:: 3057

**Applicant Information**

Applicant Authority type:: Inventor  
Primary Citizenship Country:: Australia  
Status:: Full Capacity  
Given Name:: David  
Family Name:: McGregor  
City of Residence:: Wheelers Hill  
State or Province of Residence:: Victoria  
Country of Residence:: Australia  
Street of Mailing Address:: 2 Pineview Close  
City of Mailing Address:: Wheelers Hill  
Country of Mailing Address:: Australia  
Postal or Zip Code of Mailing Address:: 3150

Representative Information	
Representative Customer Number::	23973
Contact Name:	Gregory J. Lavorgna
Contact Number:	(215) 988-3309

Domestic Priority Information			
Application::	Continuity Type::	Priority Application::	Parent Filing Date::
This application	35 USC § 371 of	PCT/AU2004/001663	November 26, 2004

Foreign Priority Information			
Country::	Application number::	Filing Date::	Priority claimed::
AU	2003906527	November 26, 2003	YES

Assignee Information	
Assignee Name::	Point of Pay Pty Ltd
Street of Mailing Address::	26 Harker Street
City of Mailing Address::	Burwood
State or Province of Mailing Address::	Victoria
Country of Mailing Address::	Australia
Postal or Zip Code of Mailing Address::	3125